

**Title of Research** The Role of Interpreters in Patient Education and Decision Making: Can educating interpreters lead to improved MMR vaccination rates in Minnesota's Somali community?

**Presenter**

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**Abstract**

**Objective or Hypothesis** Recent outbreaks of measles in the Twin Cities and elsewhere in the United States have made the topic of childhood vaccination very relevant for Minnesota physicians. Our previous work in this area confirmed anecdotal evidence that Somali parents are significantly more likely than others to refuse vaccines for their children because of fears over a link to autism. Many Somalis living in the Twin Cities (Minneapolis-St Paul metro area) are not English speakers, and depend completely on interpreters to be their conduits of information during clinic visits. While they often play a crucial role in patient understanding of health information, very little is known about the role that interpreters play, actively or passively, in patient decision making. The purpose of our study was to investigate the impact of interpreters on patient decision making regarding MMR (measles, mumps, rubella) vaccination.

**Population** The study was conducted with Smiley's Family Medicine Clinic and the Kim Tong Translation Services interpreter agency, both located in the Twin Cities. Kim Tong employs more than 500 interpreters and can provide services in over 60 languages, including Somali. This agency was chosen because they predominantly serve Somali patients requiring interpreter services at Smiley's Clinic. Approximately 40% of Smiley's patients are African, and the vast majority of those are Somali. The topic of childhood vaccinations is well suited to study at Smiley's clinic, as only 74% of Somali children aged 18-36 months at Smiley's have received the MMR vaccine, compared to 94% of non-Somali children.

**Methods** A 30 minute training presentation was developed to educate interpreters on the purpose, safety and efficacy of childhood vaccinations, as well as to dispel common misconceptions regarding those vaccinations. This training was provided to professional interpreters at a bimonthly staff training. A survey was given before the presentation to determine 1) the impact that interpreters believe they have on patient decision making, 2) their personal beliefs regarding childhood vaccines, 3) knowledge of vaccination administration, safety and efficacy, and 4) participant demographics. Key survey items were repeated in a post-training survey to determine whether the training improved measured variables. A Sign test was used to test for changes in knowledge. Differences in perceptions and knowledge were also compared between Somali and non-Somali interpreters and analyzed using a Fisher Exact test.

In addition, a chart review of MMR vaccination of Somali children was conducted. MMR vaccination rates were compared for the three months immediately prior to and following the interpreter training, to assess whether interpreter training was associated with an increase in vaccination rates.

**Main Results** Results and conclusions to be presented.

**IRB Exemption** ☒ **HIPAA Compliance** ☒ **Mentor(s)** Diane Madlon-Kay, MD

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